PART B - FEE(S) TRANSMITTAL

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DECHERT ATTN: ALLEN BLOOM, ESQ 4000 BELL ATLANTIC TOWER 1717 ARCH STREET PHILADELPHIA, PA 19103



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Peggy Ferello	(Depositor's name)
Geggy Ferello	(Signature)
Pebruary 26, 2004	(Date)

7					
1	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	09/674.779	01/03/2001	Jean-Louis Ruelle	BM45311	5330

TITLE OF INVENTION: BASB019 PROTEINS AND GENES FROM MORAXELLA CATARRHALIS, ANTIGENS, ANTIBODIES, AND USES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$0	\$1330	02/26/2004
EXAN	MINER	ART UNI	T	CLASS-SUBCLASS		
BASKAR, PADMAVATHI		1645		435-005000		•
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or 1 Jeffrey A. Sutte			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or			A. Meade	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				d the names of up to 2 regis or agents. If no name is liste inted.		

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CmithVline Deceham Diel

Smithkiine Beecham Biolog	Jicais, s.a. Rix	ensart,	BELGIUM	
Please check the appropriate assignee category or cate	egories (will not be printed on the patent);	☐ individual	El corporation or other private group entity	☐ government
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):			
☐ Issue Fee	☐ A check in the amo	unt of the fee(s)	is enclosed.	
☐ Publication Fee	Payment by credit of	ard. Form PTO-	2038 is attached.	
Advance Order - # of Copies Two (2)	The Director is he Deposit Account Num	reby authorized iber 50-0	by charge the required fee(s), or credit any expression (enclose an extra copy of this	overpayment, to form).
Director for Patents is requested to apply the Issue Fee	e and Publication Fee (if any) or to re-apply	any previously r	paid issue fee to the application identified above	/e.

(Authorized Signature)	<i></i>	(m.	ente	(Date)	
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03/03/2004 EAREGAY2 00000209 500258 09674779

01 FC:1501 1330.00 DA 02 FC:8001 6.00 DA

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Complete if Known

BM45311

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Attorney Docket No

FI	EE	TR	AN	SN	IIT	TAI	
	•	for	FY	20	04		

(\$) 1,336.00

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Application Number	09/6/4,779
Filing Date	January 3, 2001
First Named Inventor	Ruelle
Examiner Name	Baskar, Padmavathi
Art Unit	1645

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:	Large E					
Denosit	Fee Code	Fee (\$)		Fee (\$)	Fee Description	Fee Paid
Account S0-0258	1051	130	2051		Surcharge - late filing fee or oath	, cc , u.u.
Deposit Account	1052	50	2052	25	Surcharge - late provisional filing fee or	
Name	1053	130	1053	130	cover sheet Non-English specification	
The Director is authorized to: (check all that apply)	1812		1812		For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804		Requesting publication of SIR prior to	
					Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Fee Paid Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional	
Fee from	1501		2501	665	Utility issue fee (or reissue)	1,330.00
Extra Claims below Fee Paid Total Claims -20** = X = X	1502	480	2502		Design issue fee	
Independent 222	1503	640	2503		Plant issue fee	
Claims - 3 =	1460	130	1460		Petitions to the Commissioner	
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021	40	8021	l 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	(37 CFR 1.129(a)) For each additional invention to be	
1204 86 2204 43 ** Reissue independent claims	10.0	,,,	2010	, 505	examined (37 CFR 1.129(b))	
over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
<u> </u>	Other	fee (sp	ecify)	two	advance patent copies @ \$2,00 =	6.00
SUBTOTAL (2) ((\$) **or number previously paid, if greater; For Reissues, see above		٠.		Filing F	ee Paid SUBTOTAL (3) (\$) 1,336	5.00

SUBMITTED BY

(Complete (if applicable))

Name (Print/Type)

Eric A. Meade

Registration No. (Attornev/Agent)

Signature

(Complete (if applicable))

Telephone (609) 620-3248

Date

February 26, 2004

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